License No.	

## **AFFIDAVIT**

I certify that I am the owner of the dog that is the subject of this Dog License Application. I further certify that I am a "person with a disability" as that term is defined in Section § 102 of the Pennsylvania Dog Law (P.L. 784, No. 225 as amended), in that:
I receive disability insurance or supplemental security income for the aged, blind or disabled under the Social Security Act (49 STAT. 620, 42 U.S.C. 301 et.seq.)
I receive a rent or property tax rebate under the Act of March 11, 1991 (P.L. 104, No. 3), known as the "Senior Citizens Rebate and Assistance Act," on account of Disability.
I have a handicapped license plate under 75 Pa. C.S. 1338 (relation to handicapped plate and placard). Both a handicapped license plate AND placard are needed; a placard alone does not satisfy the definition of 'person with a disability.' It specifically states 'handicapped license plate.'
I have a disability certificate issued by the United States Veteran's Administration.
I make this statement subject to the criminal penalties of 18 Pa. C.S. § 4904 relating to unsworn falsification to authorities.
Dog Owner Applicant (Print Name)
Dog Owner Applicant (Signature)

<sup>\*\*</sup>Bucks County Treasurer's Office - 55 East Court Street - Doylestown, PA 18901 (215) 348-6244 (Fax) 267-885-1419)\*\*